Substitute for form 1449/PT
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INFORMATION	DESCLOSUE

Complete if Known Application Number 10/719,678 Filing Date November 21, 2003 First Named Inventor Fokken Group Art Unit 1714 Examiner Name J. Anthony

STATEMENT BY APPLICATION (Use as many sheets as necessary)

038827/270793 Sheet Attorney Docket Number

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Examiner Initials*	Cite No.	Document Number Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear		
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Examiner Date Signature Considered

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. RTA01/2171389v1

Substitute for form 1449/PTO				Complete if Known			
(Revised 04/	2003)			Application Number	10/719,678		
INFORMATION DISCLOSUDE				Filing Date	November 21, 2003		
INFORMATION DISCLOSURE				First Named Inventor	Fokken		
STATEMENT BY APPLICANT				Group Art Unit	1714		
(Use as many sheets as necessary))	Examiner Name	J. Anthony		
Sheet	2	of	2	Attorney Docket Number	038827/270793		

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